Bates Beg : PUBLIX-MDLT8-00098454

All Custodians : R Drive: Pharmacy Ops

Sort Date/Time : 6/2/2010 11:16:00 AM



Associate Initials

Pharmacy Manager

RPh/Assistant PM

RPh/Assistant PM

Technician

Technician

Technician

Technician

Technician

To All Pharmacies

Date June 2, 2010

Subject Pharmacy Weekly Memo

Compliance

All Pharmacies should have received a Combat Meth renewal certificate via mail from the DEA office. If you have not received a copy of your renewal certificate by now, please follow the instructions in the attached document, *Combat Meth Cert.pdf*. Once you have printed a copy of the Combat Meth certificate, file it within the appropriate tab in your pharmacy's accordion file.

Integrated Care Weekly Ad – This Week

The weekly ad circular for this week (June 3rd) will feature the Accu-Chek Aviva meter. These meters will be on sale for \$14.99. With the added benefit of a mail-in rebate contained in the package, the customer can ultimately get the meter for free. The sale price of \$14.99 will be good for two weeks (6/3 to 6/16). No LU# is needed, the product will automatically scan at the sale price during the promotional period.

Additionally, the ad calls out their new *Connect* Program*, which offers copay savings on Aviva test strip prescriptions as well as additional education/support. If the Aviva meters that you have in stock look like the one pictured in the ad (below), the *Connect* Program information is contained in the box. If you have older packaging in stock that does not look like below, you can refer customers to 1-866-775-2016 or www.accu-chekconnect.com for more information about the *Connect* Program. (*The *Connect* Program is not valid for prescriptions eligible to be reimbursed under Medicare, Medicaid or any other government healthcare program. Also not valid for cash-paying customers.)

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Managed Care

New PUB Edit – On Thursday, June 3rd, we will be introducing a new PUB edit that will notify you when a generic is available for Z rated products. Our current editing does not identify possible generic dispensing opportunities for products like Adderall, Cardizem, Toprol and others. Certain PBMs are requiring that we dispense the generic forms of these items, regardless of whether there is an A/B rated product available or not. The patient can continue to receive the brand if they choose, but you will need to document such on either an Rx Note in Enterprise or on the hard copy in PDX. Submitting with a DAW value of 2 may increase the patient's copay, but it is the only way we can be guaranteed of being properly paid. The best solution, as always in these situations, is to dispense the generic form.

The reject message will read:

PUB Edit 18049 - Product requires generic substitution for proper payment by third party, if patient wants brand name, document with Rx Note or Hard Copy and retransmit with DAW 2 otherwise dispense generic.

We are putting the edits in place to make sure we are being paid properly by the third party. Continuing to dispense the brand name for these products will only result in more losses.

We have also activated a PUB edit that will prevent Florida stores from submitting any more H1N1 transactions because the protocol for Florida stores has expired. This does not affect other states.

Electronic Prescribing of Controlled Substances – There have been some articles appearing stating that on June 1, 2010 properly credentialed prescribers can begin sending controlled substances via electronic prescribing. The term 'properly credentialed' is key to making this a reality. Right now, there are no 'properly credentialed' prescribers out there and we do not expect any for some time.

The Drug Enforcement Agency published an Interim Final Rule, "Electronic Prescriptions for Controlled Substances," on March 31, 2010. The rule is

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effective 60 days after the publishing in the federal registry, June 1, 2010. However, because this rule is classified as a "major rule," congressional review also must be completed by June 1. Thus, while June 1 is the implementation date of the interim final rule, it is unclear what, if any, parts will be operational on this date

After all this takes place, the various prescriber systems, intermediaries (Sure Scripts, Relay Health) and the pharmacy practice systems (PDX, Enterprise and others) must all be 'certified' by companies picked by the DEA to do so. At this time, none of the companies have been selected to perform the certification of the various systems and the DEA has not even asked for companies who may want to perform this role to apply. No one knows when this will take place.

Until such time as everything is properly 'certified' you cannot fill prescriptions for controlled substances received via e-prescribing. Unfortunately, there are no checks and balances in the e-prescribing system to prevent a prescriber from sending a controlled substance prescription. If you do happen to receive one, you must contact the prescriber and create a new prescription before you can fill it.

Procurement Promethes

Promethegan Suppositories

Promethegan 12.5, 25, and 50mg suppositories will now ship in quantities of 3 boxes anytime it is ordered from the warehouse for EnterpriseRx pharmacies only. Be sure to remove your refrigerated items from your thermal bags before returning them to the pharmacy warehouse.

A1C Now Selfcheck

The A1C Now Selfcheck has been added to the Pharmacy OTC Core Item list (new list will be posted on the pharmacy portal tonight). EnterpriseRx and PDX pharmacies had order points added to your systems to keep one meter in stock. Please display in your OTC section. New planograms are under development and will be posted in the near future.

Angiotensin Receptor Blocker (ARB) Substitution Form

Recently, Losartan became the first generic ARB approved. A new fax form has been posted on the pharmacy portal (Forms > Fax Forms > Substitution

Faxes > Angiotensin Receptor Blocker (ARB) Substitution Form) to simplify the new prescription request process. Many of the ARBs have 3rd tier copays on insurance plans, so this is a great opportunity to save your patients money.